



State of Wisconsin  
2013 - 2014 LEGISLATURE



LRB-2237/P3  
MED:jld:jf

In 12-17-13 Wednesday  
1520N if possible

**PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION**

TODAY

✓  
Reger

1 **AN ACT to amend** 448.05 (1) (d) and 448.05 (6) (a); **to repeal and recreate**  
2 448.05 (2); and **to create** 448.015 (4) (am) 4., 448.02 (10), 448.04 (1) (bm) and  
3 448.05 (6) (at) of the statutes; **relating to:** licensure of physicians and granting  
4 rule-making authority; providing an exemption from emergency rule procedures; and ✓

***Analysis by the Legislative Reference Bureau***

This is a preliminary draft. An analysis will be provided in a subsequent version of this draft.

***The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:***

5 **SECTION 1.** 448.015 (4) (am) 4. of the statutes is created to read:  
6 448.015 (4) (am) 4. Failure to surrender a resident educational license when  
7 required under s. 448.04 (1) (bm) 3.

\*\*\*NOTE: I included language here providing that a failure to surrender a license when required constitutes unprofessional conduct. However, this seems like it may be somewhat inconsistent with ss. 440.19 and 448.02 (5), stats. These sections suggest that the effect of a surrender is to allow one to avoid professional discipline and that DSPS and Boards may refuse to accept a surrender if a complaint has been filed, presumably

because disciplinary proceedings cannot commence if the license has been surrendered. Therefore, if a licensee is required to surrender his or her license, could (or should) he or she avoid professional discipline by doing so and, if so, is that consistent with the intent?

SECTION 2. 448.02 (10) of the statutes is created to read:

448.02 (10) DISCONTINUANCE OF POSTGRADUATE EDUCATION. If the holder of a license granted under the authority of s. 448.05 (2) (a) 2. b. subsequently discontinues his or her postgraduate training program at any time prior to the completion of the program, the program director shall notify the board, providing full details of the cause of the discontinuance and the holder's plans, if any, for completion of the postgraduate training program. The board shall review the matter and may take any appropriate action.

SECTION 3. 448.04 (1) (bm) of the statutes is created to read:

448.04 (1) (bm) *Resident educational license to practice medicine and surgery.*

1. The board may grant a resident educational license to practice medicine and surgery to an applicant who satisfies all of the following:

a. The applicant is a graduate of and possesses a diploma from a medical or osteopathic college that is accredited by the Liaison Committee on Medical Education, the American Osteopathic Association, or a successor organization and that is approved by the board.

b. The applicant has received credit for 12 months of postgraduate training in one or more postgraduate training programs accredited by the Accreditation Council for Graduate Medical Education, the American Osteopathic Association, or a successor organization.

\*\*\*\*NOTE: I assumed for this provision that the applicant could have completed the 12 months of training in more than one program. Is that correct?

INSERT  
A CONT

1 c. The applicant <sup>Proof that</sup> is currently enrolled in a postgraduate training program  
 2 accredited by the Accreditation Council for Graduate Medical Education, the  
 3 American Osteopathic Association, or a successor organization. <sup>(end ins A)</sup>

\*\*\*\*NOTE: I had to restructure this provision because of the changes that were made to s. 448.05 (2), stats. I instead put the requirements for the resident educational license directly in this provision. Let me know if any changes are needed here.

4 2. Subject to subd. 3., a license issued under this paragraph is valid for one year  
 5 and may be renewed for additional one-year terms while the licensee is enrolled in  
 6 the postgraduate training program under subd. 1. c. <sup>s. 448.05(2)(d) 3.</sup>

7 3. A license issued under this paragraph remains valid only while the licensee  
 8 is actively engaged in the practice of medicine and surgery in the postgraduate  
 9 training program under subd. 1. c. <sup>s. 448.05(2)(d) 3.</sup> and is lawfully entitled to work in the United  
 10 States. If at any time a license no longer remains valid as provided in this  
 11 subdivision, the licensee shall surrender his or her license.

\*\*\*\*NOTE: Please review this language. I tried to draft this more consistent with other language in the DSPS chapters dealing with surrender of a license. However, see the note under SECTION 1.

12 4. The holder of a license issued under this paragraph may engage in the  
 13 practice of medicine and surgery only in connection with his or her duties under the  
 14 postgraduate training program under subd. 1. c. <sup>s. 448.05(2)(d) 3.</sup>

15 SECTION 4. 448.05 (1) (d) of the statutes is amended to read:

16 448.05 (1) (d) <sup>Except as otherwise provided in s. 448.02(1)(b) be</sup> ~~be~~ found qualified by three-fourths of the members of the board,  
 17 except that an applicant for a temporary license or certificate under s. 448.04 (1) (b)  
 18 1. and 3., (e), ~~and~~ (g), or (i) or a resident educational license under s. 448.04 (1) (bm)  
 19 must be found qualified by 2 members of the board.

\*\*\*\*NOTE: The supplied language also appeared to be adding in a cross-reference here to s. 448.04 (1) (i), stats., which relates to certificates to practice respiratory care issued by the MEB, and so I made this change. I assume that this change is simply to be consistent with other provisions in subchapter II of chapter 448 and is otherwise

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3-14

unrelated to the other changes in the bill regarding physician licensure. If this change was not intended or other changes are needed here, let me know.

SECTION 5. 448.05 (2) of the statutes is repealed and recreated to read:

448.05 (2) LICENSE TO PRACTICE MEDICINE AND SURGERY. (a) Except as provided in pars. (b) <sup>and (c)</sup> ~~and (c)~~, an applicant for any class of license to practice medicine and surgery, ~~other than a resident educational license under s. 448.04 (1) (b),~~ must supply evidence satisfactory to the board of all of the following:

\*\*\*\*NOTE: There are certain kinds of temporary licenses under s. 448.04 (1) (b) 2. and 3. Are those individuals also subject to the requirements in this subsection? If the answer is not yes, then we should add a cross-reference here to except those licensed under s. 448.04 (1) (b) 2. and 3. from the requirements of this subsection.

1. That the applicant is a graduate of and possesses a diploma from a medical or osteopathic college that is accredited by the Liaison Committee on Medical Education, the American Osteopathic Association, or a successor organization and that is approved by the board.

2. That the applicant satisfies one of the following:

a. The applicant has <sup>successfully</sup> completed <sup>and received credit for</sup> 24 months of postgraduate training in one or more programs accredited by the Accreditation Council for Graduate Medical Education, the American Osteopathic Association, or a successor organization.

\*\*\*\*NOTE: I assumed for this provision that the applicant could have completed the 24 months of training in more than one program. If so, I would assume that, under subd. 3., the applicant need only be in good standing with the program in which the applicant was most recently enrolled. Is that correct?

b. The applicant is currently enrolled in a postgraduate training program accredited by the Accreditation Council for Graduate Medical Education, the American Osteopathic Association, or a successor organization; the applicant has received credit for 12 consecutive months of postgraduate training in that program; and the applicant has received an unrestricted endorsement from the postgraduate

educational program director that includes confirmation that the applicant is expected to continue in the program and complete at least 24 months of postgraduate training.

3. That the applicant is in good standing with the postgraduate training program completed by the applicant under subd. 2. a. or in which the applicant is currently enrolled under subd. 2. b. If the applicant completed training under subd. 2. a. in more than one program, the applicant must be in good standing with the program in which the applicant was most recently enrolled.

4. That the applicant has no material restrictions on or past discipline involving a license to practice medicine and surgery that was issued to the applicant in any other jurisdiction.

\*\*\*\*NOTE: Does this mean to say that, if a licensee is from another state, he or she may never be licensed in Wisconsin if he or she has ever had any past discipline?

(b) Except as provided in <sup>✓</sup> ~~par. (d)~~ <sup>par. (c) to (e)</sup>, an applicant for a license to practice medicine and surgery who is a graduate of a foreign medical school must supply evidence satisfactory to the board of all of the following:

1. That the applicant is a graduate of and possesses a diploma from a foreign medical school credentialed by an agency <sup>✓</sup> ~~approved~~ <sup>approved</sup> by the board.

2. That the applicant has obtained certification by the Educational Council for Foreign Medical Graduates or a successor organization.

3. That the applicant has passed all steps of the United States Medical Licensing Examination administered by the National Board of Medical Examiners and the Federation of State Medical Boards, or their successor organizations.

4. That the applicant has successfully completed <sup>✓</sup> ~~24~~ <sup>and received credit for</sup> months of postgraduate training in one or more programs accredited by the Accreditation Council for

1 Graduate Medical Education or the American Osteopathic Association or a successor  
2 organization *the last 12<sup>th</sup> months of which were completed in a single program*

\*\*\*\*NOTE: Does this mean that, without a waiver under par. (c), foreign grads won't be able to obtain any type of license until they complete their second year of residency? (As currently drafted, I believe the resident educational license would not be available to foreign grads.) Let me know if this is incorrect, or if the resident educational license provision should be modified to make it available to foreign grads.

3 5. That the applicant is in good standing with the postgraduate training  
4 program in which the applicant completed the training under subd. 4. or, if the  
5 applicant completed the training in more than one program, that the applicant is in  
6 good standing with the program in which the applicant was most recently enrolled.

7 6. That the applicant has no material restrictions on or past discipline  
8 involving a license to practice medicine and surgery that was issued to the applicant  
9 in any other jurisdiction.

\*\*\*\*NOTE: Does this mean to say that, if a licensee is from another jurisdiction, he or she may never be licensed in Wisconsin if he or she has ever had any past discipline?

10 (c) The board may promulgate rules specifying circumstances in which the  
11 board, in cases of hardship or in cases in which the applicant possesses a medical  
12 license issued by another jurisdiction, may grant a waiver from any requirement  
13 under par. (a) or (b). The board may grant such a waiver *only* in accordance with those  
14 rules.

15 (d) An applicant for a resident educational license under s. 448.04 (1) (bm) shall  
16 provide the board with all of the following: ✓

17 1. Written confirmation from the medical school or other institution sponsoring  
18 the postgraduate training program in which the applicant is enrolled confirming  
19 that the applicant has been *for will be* appointed to a position in the program. ✓

20 2. Evidence that the applicant is a U.S. citizen or is otherwise lawfully entitled  
21 to work in the United States.

INSERT A (from p.2) ✓

1           **SECTION 6.** 448.05 (6) (a) of the statutes is amended to read:

2           448.05 (6) (a) Except as provided in pars. (am) ~~and~~, (ar), and (at), the board  
3 shall examine each applicant it finds eligible under this section in such subject  
4 matters as the board deems applicable to the class of license or certificate which the  
5 applicant seeks to have granted. Examinations may be both written and oral. In lieu  
6 of its own examinations, in whole or in part, the board may make such use as it deems  
7 appropriate of examinations prepared, administered, and scored by national  
8 examining agencies, or by other licensing jurisdictions of the United States or  
9 Canada. The board shall specify passing grades for any and all examinations  
10 required.

11           **SECTION 7.** 448.05 (6) (at) of the statutes is created to read:

12           448.05 (6) (at) When examining an applicant for a license to practice medicine  
13 and surgery <sup>✓ or an administrative physician license</sup> under par. (a), the board may only use examinations prepared,  
14 administered, and scored by national examining agencies, except that the board may  
15 interview an individual applicant as needed to determine information specific to that  
16 applicant.

17           **SECTION 8. Initial applicability.**

18           (1) The treatment of section 448.05 (6) (a) <sup>✓</sup> and (at) <sup>✓</sup> of the statutes first applies  
19 to an applicant who is admitted to examination for a license to practice medicine and  
20 surgery by the medical examining board under section 448.05 (2) <sup>✓</sup> of the statutes, as  
21 affected by this act, on the effective date of this subsection.

22           (2) The treatment of section 448.05 (2) <sup>✓</sup> of the statutes first applies to an  
23 application for a license to practice medicine and surgery under section <sup>✓</sup> 448.05 (2) of  
24 the statutes, as affected by this act, that is received by the medical examining board  
25 on the effective date of this subsection.

**1 SECTION 9. Effective date.**

2           (1) This act takes effect on the first day of the 12th month beginning after  
3       publication.

4 (END)

**2013-2014 DRAFTING INSERT**  
**FROM THE**  
**LEGISLATIVE REFERENCE BUREAU**

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**INSERT 2-1**

1           **SECTION 1.** 448.02 (1) <sup>✓</sup> of the statutes is amended to read:  
2           448.02 (1) **LICENSE.** The board may grant licenses, including various classes  
3           of temporary licenses, to practice medicine and surgery or as an administrative  
4           physician, to practice perfusion, to practice as an anesthesiologist assistant, and to  
5           practice as a physician assistant.

**History:** 1975 c. 383, 421; 1977 c. 418; 1981 c. 135, 375, 391; 1983 a. 188 s. 10; 1983 a. 189 s. 329 (5); 1983 a. 253, 538; 1985 a. 29; 1985 a. 146 s. 8; 1985 a. 315, 332, 340; 1987 a. 27, 399, 403; 1989 a. 229; 1991 a. 186; 1993 a. 105, 107; 1995 a. 309; 1997 a. 67, 175, 191, 311; 1999 a. 32, 180; 2001 a. 89; 2009 a. 382; 2011 a. 160.

**INSERT 2-8**

6           (b) 1. A license granted under s. 448.04 (1) (bg) <sup>✓</sup> may be issued, renewed, or  
7           modified at a meeting of the board or between its meetings by the chairperson of the  
8           board. <sup>✓</sup> Such an action is considered to be an action of the board.  
9           2. If the holder of a license granted under s. <sup>✓</sup>448.04 (1) (bg) ceases to teach,  
10          research, or practice medicine and surgery at the medical education facility, medical  
11          research facility, or medical school where he or she is visiting, <sup>e</sup>~~the~~ the medical  
12          education facility, medical research facility, or medical school shall notify the board.

\*\*\*\*NOTE: I included the language in the last two sentences as requested from the Nevada law. But note that this language allowing the chairperson to act on his or her own would make this unique among licenses.

13          **SECTION 2.** 448.04 (1) (ac) <sup>✓</sup> of the statutes is created to read:  
14          448.04 (1) (ac) *Administrative physician license.* <sup>✓</sup> The board may grant an  
15          administrative physician license to an applicant who satisfies the requirements  
16          under s. 448.05 (2c). <sup>✓</sup> The board shall issue a license under this paragraph subject  
17          to the same terms as a license issued under par. <sup>✓</sup>(a), except that, notwithstanding any  
18          other provision of law that permits a physician to engage in any act that constitutes  
19          the practice of medicine and surgery, the holder of a license issued under this

paragraph may not engage in the practice of medicine and surgery and may not practice as provided in s. 448.035.

\*\*\*\*NOTE: I wasn't sure exactly how to translate the requirements from Nevada law, and the requirement for a regular license described by Dr. Westlake that a physician be actively practicing does not appear to be in the statutes (so I assume this is an MEB requirement). So, please let me know if any changes are needed here.

**SECTION 3.** 448.04 (1) (b) 2. of the statutes is repealed.

**SECTION 4.** 448.04 (1) (bg) and (bm) of the statutes are created to read:

448.04 (1) (bg) *Restricted license to practice medicine and surgery as a visiting physician.* 1. The board may, in accordance with s. 448.02 (10) (b), grant a restricted license to practice medicine and surgery as a visiting physician to an applicant who satisfies the requirements under s. 448.05 (2) (e).

2. The holder of a license issued under this paragraph may engage in the practice of medicine and surgery only at the medical education facility, medical research facility, or medical school where the person is teaching, researching, or practicing, and only in accordance with the terms and restrictions established by the board.

3. A license issued under this paragraph may be granted or renewed by the board in accordance with s. 448.02 (10) (b).

4. Subject to subd. 5., a license issued under this paragraph is valid for one year and may be renewed at the discretion of the board.

5. A license issued under this paragraph remains valid only while the licensee is actively engaged in teaching, researching, or practicing medicine and surgery and is lawfully entitled to work in the United States.

\*\*\*\*NOTE: Instead of requiring the licensee to notify the institution and requiring the institution to notify the MEB, I included this provision, similar to what is in par. (bm), below, for RELs. Will that work?

INSERT 3-14



1           **SECTION 5.** 448.04 (1) (c) <sup>✓</sup> of the statutes is repealed.

2           **SECTION 6.** 448.05 (1) (c) of the statutes is amended to read:

3           448.05 (1) (c) Achieve a passing grade in ~~the~~ any examinations required in this  
4           section.

**History:** 1975 c. 383, 421; 1979 c. 221; 1981 c. 380; 1981 c. 391 s. 211; 1987 a. 399; 1989 a. 229; 1991 a. 180; 1993 a. 105, 107; 1995 a. 27 s. 9126 (19); 1995 a. 171, 172, 245; 1997 a. 27, 67, 175; 1999 a. 180; 2001 a. 89; 2007 a. 20 s. 9121 (6) (a); 2011 a. 160.

\*\*\*\*NOTE: I made this change because it seems like examinations may not be required for all types of licenses and this accounts for this better. ✓

**INSERT 4-5**

\*\*\*\*NOTE: Let me know if this should apply to a camp or substitute physician under s. 448.04 (1) (b) 3. ✓

**INSERT 5-4**

5           3. That the applicant satisfies any other requirement established by the board  
6           for issuing the license. ✓

\*\*\*\*NOTE: In order to better distinguish the requirements for a regular license from an administrative license, I added this provision. Is that OK? ✓

**INSERT 6-2**

7           5. That the applicant satisfies any other requirement established by the board  
8           for issuing the license. ✓

\*\*\*\*NOTE: In order to better distinguish the requirements for a regular license from an administrative license, I added this provision. Is that OK? ✓

**INSERT 6-20**

9           (e) An applicant for a restricted license to practice medicine and surgery as a  
10          visiting physician shall provide the board with all of the following: ✓

11          1. Proof that the applicant is a graduate of and possesses a diploma from a  
12          medical or osteopathic college that is approved by the board.

13          2. Proof that the applicant teaches medicine, engages in medical research, or  
14          practices medicine and surgery outside this state. ✓



\*\*\*\*NOTE: Is this correct? I assumed this would not be available to someone practicing or researching who already resides in the state.

1           3. Documentation that the applicant intends to teach, research, or practice  
2 medicine and surgery at a medical education facility, medical research facility, or  
3 medical school in this state, which must include a signed letter from the dean or  
4 president of the facility or school.

5           4. Proof that the applicant satisfies any other requirement established by the  
6 board for issuing the license.✓

7           **SECTION 7.** 448.05 (2c)✗ of the statutes is created to read:

8           448.05 (2c) ADMINISTRATIVE PHYSICIAN LICENSE.✓ An applicant for an  
9 administrative physician license must supply evidence satisfactory to the board that  
10 he or she satisfies the requirements for a license to practice medicine and surgery  
11 under sub. (2) (a) or (b),✓ subject to any waiver granted under sub. (2) (c), other than  
12 any requirement established by the board relating to the active practice of medicine  
13 and surgery.

\*\*\*\*NOTE: Please review this provision and let me know if any changes or other provisions related to this administrative license are needed. Could an administrative physician engage in the practice of medicine and surgery under another physician's delegated practice? ✓

**INSERT 7-16**

14           **SECTION 8.** 448.06 (1)✗ of the statutes is amended to read:

15           448.06 (1) GRANT OF LICENSE, CERTIFICATE, OR LIMITED PERMIT. If Subject to s.  
16 448.05 (1) (d),✓ if three-fourths of the members of the board find that an applicant who  
17 has passed the required examinations is qualified, the board shall so notify the  
18 applicant and shall grant the license, certificate, or limited permit.

History: 1975 c. 383, 421; 1985 a. 340; 1987 a. 399; 1999 a. 180.

19           **SECTION 9.** 448.065 of the statutes is amended to read:

↙


1           **448.065 Permanent license for certain professors.** A person who  
2 possesses a temporary license under s. 448.04 (1) (b) 2., 2011 stats., and who has  
3 practiced under such license for 4 or more years may apply for a license to practice  
4 medicine and surgery under s. 448.04 (1) (a). If the applicant achieves a passing  
5 grade in the examination for a license to practice medicine and surgery and  
6 three-fourths of the board find that the applicant is qualified, notwithstanding s.  
7 448.05 (1) (b) and (2), the board may grant the license. The board may limit the  
8 license and, notwithstanding s. 448.02 (3) (e), may continue such limits indefinitely  
9 or may remove the limits when it is satisfied that the reasons for the limits no longer  
10 exist, except that the board shall remove any limitations on the geographical areas  
11 of this state in which the physician may practice and any limitations on the persons  
12 with whom the physician may associate, after a period of 5 years of continuous  
13 medical practice within this state by the physician.

**History:** 1977 c. 329; 1981 c. 135; 1985 a. 29 ss. 2238z, 3202 (45).

\*\*\*\*NOTE: Do you want to repeal this provision instead, or allow licensees under s.  
448.04 (1) (bg),<sup>✓</sup> as created in the bill, to obtain a permanent license in this manner?

14           **SECTION 10.** 448.08 (1) (a) of the statutes is amended to read:

15           448.08 (1) (a) "Hospital" means an institution providing 24-hour continuous  
16 service to patients confined therein which is primarily engaged in providing facilities  
17 for diagnostic and therapeutic services for the surgical and medical diagnosis,  
18 treatment and care, of injured or sick persons, by or under the supervision of a  
19 professional staff of physicians and surgeons, and which is not primarily a place of  
20 rest for the aged, drug addicts or alcoholics, or a nursing home. Such hospitals may  
21 charge patients directly for the services of their employee nurses, nonphysician  
22 anesthetists, physical therapists and medical assistants other than physicians or  
23 dentists, and may engage on a salary basis interns and residents who are



1 participating in an accredited training program under the supervision of the medical  
2 staff, and persons with a resident educational license issued under s. 448.04 (1) (bm)  
3 or a temporary educational certificate issued under s. 448.04 (1) (c), 2011 stats.

History: 1975 c. 383, 421; 1977 c. 29; 1993 a. 107, 473; 1995 a. 167, 225; 1997 a. 175; 2007 a. 97.

4 **SECTION 11. 448.10 (2) of the statutes is created to read:**

5 448.10 (2) LICENSES TO PRACTICE MEDICINE AND SURGERY. (a) Notwithstanding  
6 s. 448.05 (2), a person who, on the effective date of this paragraph .... [LRB inserts  
7 date], possessed a valid license to practice medicine and surgery under s. 448.05 (2),  
8 2011 stats., may retain, practice under, and continue to renew that license, subject  
9 to any other provisions in this subchapter or any requirements established by the  
10 board governing a license to practice medicine and surgery.

11 (b) A person who, on the effective date of this paragraph .... [LRB inserts date],  
12 possessed a valid temporary license to practice medicine and surgery under s. 448.04  
13 (1) (b) 2., 2011 stats., may retain, practice under, and continue to renew that license  
14 in accordance with s. 448.04 (1) (b) 2., 2011 stats., subject to any other provisions in  
15 this subchapter or any requirements established by the board governing that license.

16 (c) A person who, on the effective date of this paragraph .... [LRB inserts date],  
17 possessed a valid temporary educational permit to practice medicine and surgery  
18 under s. 448.04 (1) (c), 2011 stats., may retain, practice under, and continue to renew  
19 that permit in accordance with s. 448.04 (1) (c), 2011 stats., subject to any other  
20 provisions in this subchapter or any requirements established by the board  
21 governing that permit, or may apply for a resident educational license permit under s.

22 448.05 (1) (bm).  
e 448.04

\*\*\*\*NOTE: Please review these three grandfathering provisions and let me know if further changes are needed. You may wish to have DSPS review these. Paragraph (a) lets physicians who currently hold licenses retain those licenses even if they would not be able to qualify for one under the new law. Paragraphs (b) and (c) allow holders of licenses and permits under the repealed provisions to keep them in accordance with prior

law. The MEB may also want to take a look at s. 448.10 (4) and (5), stats., and see if those are still relevant. If not, I could repeal them in this bill.

**SECTION 12.** 462.01 (4) of the statutes is amended to read:

462.01 (4) "Physician" means a person licensed to practice medicine and surgery under s. 448.04 (1) (a) ~~or~~, (b), or (bg).

\*\*\*\*NOTE: This provision relates to the practice of radiography and appears to exclude those possessing temporary educational permits under s. 448.04 (1) (c), so I did not include REL holders in this provision. Let me know if this is incorrect or if other changes are needed here.

History: 2009 a. 106; 2011 a. 32.

**SECTION 13. Nonstatutory provisions.**

(1) Using the procedure under section 227.24 of the statutes, the medical examining board may promulgate rules under section 448.40 (1) of the statutes that are necessary to implement the changes in this act and rules under section 448.05 (2) (c), as affected by this act, for the period before the effective date of any permanent rules promulgated under section 448.40 (1) of the statutes, but not to exceed the period authorized under section 227.24 (1) (c) of the statutes, subject to extension under section 227.24 (2) of the statutes. Notwithstanding section 227.24 (1) (a), (2) (b), and (3) of the statutes, the board is not required to provide evidence that promulgating a rule under this subsection as an emergency rule is necessary for the preservation of the public peace, health, safety, or welfare and is not required to provide a finding of emergency for a rule promulgated under this subsection.

\*\*\*\*NOTE: This provision gives the MEB the authority to promulgate emergency rules if doing so is necessary to implement the changes in this act. Note that these rules, under this provision, could only be in effect for a maximum of 270 days. If more time would be needed for permanent rules, this provision could be modified to allow the emergency rules to remain in place for a longer period.

(end ins 7-16)



State of Wisconsin  
2013 - 2014 LEGISLATURE



LRB-2237/P3  
MED:jld:jm

LPS  
8/2/13  
1P3

due FRIDAY please

**PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION**

✓  
Reyer

1 AN ACT *to repeal* 448.04 (1) (b) 2. and 448.04 (1) (c); *to amend* 448.02 (1), 448.05  
2 (1) (c), 448.05 (1) (d), 448.05 (6) (a), 448.06 (1), 448.065, 448.08 (1) (a) and 462.01  
3 (4); *to repeal and recreate* 448.05 (2); and *to create* 448.02 (10), 448.04 (1)  
4 (ac), 448.04 (1) (bg) and (bm), 448.05 (2c), 448.05 (6) (at) and 448.10 (2) of the  
5 statutes; **relating to:** licensure of physicians; providing an exemption from  
6 emergency rule procedures; and granting rule-making authority.

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***Analysis by the Legislative Reference Bureau***

This is a preliminary draft. An analysis will be provided in a subsequent version of this draft.

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***The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:***

7 SECTION 1. 448.02 (1) of the statutes is amended to read:  
8 448.02 (1) LICENSE. The board may grant licenses, including various classes  
9 of temporary licenses, to practice medicine and surgery or as an administrative

1 physician, to practice perfusion, to practice as an anesthesiologist assistant, and to  
2 practice as a physician assistant.

3 **SECTION 2.** 448.02 (10) of the statutes is created to read:

4 **448.02 (10) SPECIAL PROVISIONS FOR CERTAIN LICENSES.** (a) If the holder of a  
5 license granted under the authority of s. 448.05 (2) (a) 2. b. subsequently  
6 discontinues his or her postgraduate training program at any time prior to the  
7 completion of the program, the program director shall notify the board, providing full  
8 details of the cause of the discontinuance and the holder's plans, if any, for completion  
9 of the postgraduate training program. The board shall review the matter and may  
10 take any appropriate action.

11 (b) 1. A license granted under s. 448.04 (1) (bg) may be issued, renewed, or  
12 modified at a meeting of the board or between its meetings by the chairperson of the  
13 board. Such an action is considered to be an action of the board.

14 2. If the holder of a license granted under s. 448.04 (1) (bg) ceases to teach,  
15 research, or practice medicine and surgery at the medical education facility, medical  
16 research facility, or medical school where he or she is visiting, the medical education  
17 facility, medical research facility, or medical school shall notify the board.

\*\*\*\*NOTE: I included <sup>the</sup> ~~the~~ language <sup>in the</sup> ~~on the~~ last two sentences as requested from the Nevada law. But note that ~~this~~ <sup>the</sup> language allowing the chairperson to act on his or her own would make this unique among licenses. ✓

18 **SECTION 3.** 448.04 (1) (ac) <sup>the</sup> of the statutes is created to read:

19 **448.04 (1) (ac) Administrative physician license.** The board may grant an  
20 administrative physician license to an applicant who satisfies the requirements  
21 under s. 448.05 (2c). The board shall issue a license under this paragraph subject  
22 to the same terms as a license issued under par. (a), except that, notwithstanding any  
23 other provision of law that permits a physician to engage in any act that constitutes

1 the practice of medicine and surgery, the holder of a license issued under this  
2 paragraph may not engage in the practice of medicine and surgery and may not  
3 practice as provided in s. 448.035.

\*\*\*\*NOTE: I wasn't sure exactly how to translate the requirements from Nevada law, and the requirement for a regular license described by Dr. Westlake that a physician be actively practicing does not appear to be in the statutes (so I assume this is an MEB requirement). So, please let me know if any changes are needed here.

4 **SECTION 4.** 448.04 (1) (b) 2. of the statutes is repealed.

5 **SECTION 5.** 448.04 (1) (bg) and (bm) of the statutes are created to read:

6 448.04 (1) (bg) *Restricted license to practice medicine and surgery as a visiting*  
7 *physician.* 1. The board may, in accordance with s. 448.02 (10) (b), grant a restricted  
8 license to practice medicine and surgery as a visiting physician to an applicant who  
9 satisfies the requirements under s. 448.05 (2) (e).

10 2. The holder of a license issued under this paragraph may engage in the  
11 practice of medicine and surgery only at the medical education facility, medical  
12 research facility, or medical school where the person is teaching, researching, or  
13 practicing, and only in accordance with the terms and restrictions established by the  
14 board.

15 3. A license issued under this paragraph may be granted or renewed by the  
16 board in accordance with s. 448.02 (10) (b).

17 4. Subject to subd. 5., a license issued under this paragraph is valid for one year  
18 and may be renewed at the discretion of the board. *as provided in subd. 3 ✓*

19 5. A license issued under this paragraph remains valid only while the licensee  
20 is actively engaged in teaching, researching, or practicing medicine and surgery and  
21 is lawfully entitled to work in the United States.

\*\*\*\*NOTE: Instead of requiring the licensee to notify the institution and requiring the institution to notify the MEB, I included this provision, similar to what is in par. (bm), below, for RELs. Will that work?

(bm) *Resident educational license to practice medicine and surgery.* 1. The board may grant a resident educational license to practice medicine and surgery to an applicant who satisfies the requirements under s. 448.05 (2) (d).

2. Subject to subd. 3., a license issued under this paragraph is valid for one year and may be renewed for additional one-year terms while the licensee is enrolled in the postgraduate training program under s. 448.05 (2) (d) <sup>3.</sup> <sup>el.</sup>

3. A license issued under this paragraph remains valid only while the licensee is actively engaged in the practice of medicine and surgery in the postgraduate training program under s. 448.05 (2) (d) <sup>3.</sup> <sup>el.</sup> and is lawfully entitled to work in the United States.

4. The holder of a license issued under this paragraph may engage in the practice of medicine and surgery only in connection with his or her duties under the postgraduate training program under s. 448.05 (2) (d) <sup>3.</sup> <sup>el.</sup>

**SECTION 6.** 448.04 (1) (c) of the statutes is repealed.

**SECTION 7.** 448.05 (1) (c) of the statutes is amended to read:

448.05 (1) (c) Achieve a passing grade in ~~the~~ any examinations required in this section.

\*\*\*\*NOTE: I made this change because it seems like examinations may not be required for all types of licenses and this accounts for this better. Is that OK? ✓

**SECTION 8.** 448.05 (1) (d) of the statutes is amended to read:

448.05 (1) (d) Be Except as otherwise provided in s. 448.02 (10) (b), be found qualified by three-fourths of the members of the board, except that an applicant for a temporary license or certificate under s. 448.04 (1) (b) 1. and 3., (e), and (g), or (i) or a resident educational license under s. 448.04 (1) (bm) must be found qualified by 2 members of the board.

1           **SECTION 9.** 448.05 (2) of the statutes is repealed and recreated to read:

2           **448.05 (2) LICENSE TO PRACTICE MEDICINE AND SURGERY.** (a) Except as provided  
3 in pars. (b) to (e), an applicant for any class of license to practice medicine and surgery  
4 must supply evidence satisfactory to the board of all of the following:

      ✱       \*\*\*\*NOTE: Let me know if this <sup>✓</sup>should <sup>not</sup> apply to a camp or substitute physician under  
              s. 448.04 (1) (b) 3.

5           1. That the applicant is a graduate of and possesses a diploma from a medical  
6 or osteopathic college that is accredited by the Liaison Committee on Medical  
7 Education, the American Osteopathic Association, or a successor organization and  
8 that is approved by the board.

9           2. That the applicant satisfies one of the following:

10          a. The applicant has successfully completed and received credit for 24 months  
11 of postgraduate training in one or more programs accredited by the Accreditation  
12 Council for Graduate Medical Education, the American Osteopathic Association, or  
13 a successor organization.

14          b. The applicant is currently enrolled in a postgraduate training program  
15 accredited by the Accreditation Council for Graduate Medical Education, the  
16 American Osteopathic Association, or a successor organization; the applicant has  
17 successfully completed and received credit for 12 consecutive months of  
18 postgraduate training in that program; and the applicant has received an  
19 unrestricted endorsement from the postgraduate educational program director that  
20 includes confirmation that the applicant is expected to continue in the program and  
21 complete at least 24 months of postgraduate training.

22          3. That the applicant satisfies any other requirement established by the board  
23 for issuing the license.

\*\*\*\*NOTE: In order to better distinguish the requirements for a regular license from an administrative license, I added this provision. Is that OK?

1 (b) Except as provided in pars. (c) to (e), an applicant for a license to practice  
2 medicine and surgery who is a graduate of a foreign medical school must supply  
3 evidence satisfactory to the board of all of the following:

4 1. That the applicant is a graduate of and possesses a diploma from a foreign  
5 medical school credentialed by an agency approved by the board.

6 2. That the applicant has obtained certification by the Educational Council for  
7 Foreign Medical Graduates or a successor organization.

8 3. That the applicant has passed all steps of the United States Medical  
9 Licensing Examination administered by the National Board of Medical Examiners  
10 and the Federation of State Medical Boards, or their successor organizations.

11 4. That the applicant has successfully completed and received credit for 24  
12 months of postgraduate training in one or more programs accredited by the  
13 Accreditation Council for Graduate Medical Education or the American Osteopathic  
14 Association or a successor organization, the last 12 months of which were completed  
15 in a single program.

16 5. That the applicant satisfies any other requirement established by the board  
17 for issuing the license.

\*\*\*\*NOTE: In order to better distinguish the requirements for a regular license from an administrative license, I added this provision. Is that OK?

18 (c) The board may promulgate rules specifying circumstances in which the  
19 board, in cases of hardship or in cases in which the applicant possesses a medical  
20 license issued by another jurisdiction, may grant a waiver from any requirement  
21 under par. (a) or (b). The board may grant such a waiver only in accordance with  
22 those rules.

(d) An applicant for a resident educational license under s. 448.04 (1) (bm) shall provide the board with all of the following:

③ ①. Written confirmation from the institution sponsoring the postgraduate training program <sup>into</sup> in which the applicant <sup>has been accepted</sup> is enrolled confirming that the applicant has been or will be appointed to a position in the program.

⑥ ②. Proof that the applicant is a graduate of and possesses a diploma from a medical or osteopathic college that is approved by the board. ✓

⑧ ③. Proof that the applicant has been accepted into a postgraduate training program accredited by the Accreditation Council for Graduate Medical Education, the American Osteopathic Association, or a successor organization.

(e) An applicant for a restricted license to practice medicine and surgery as a visiting <sup>under s. 448.04 (1) (bg)</sup> physician shall provide the board with all of the following:

1. Proof that the applicant is a graduate of and possesses a diploma from a medical or osteopathic college that is approved by the board.

2. Proof that the applicant teaches medicine, engages in medical research, or practices medicine and surgery outside this state.

\*\*\*NOTE: Is this correct? I assumed this would not be available to someone practicing or researching who already resides in the state.

3. Documentation that the applicant intends to teach, research, or practice medicine and surgery at a medical education facility, medical research facility, or medical school in this state, which must include a signed letter from the dean or president of the facility or school.

4. Proof that the applicant satisfies any other requirement established by the board for issuing the license.

SECTION 10. 448.05 (2c) of the statutes is created to read:

1           448.05 (2c) ADMINISTRATIVE PHYSICIAN LICENSE. An applicant for an  
2 administrative physician license must supply evidence satisfactory to the board that  
3 he or she satisfies the requirements for a license to practice medicine and surgery  
4 under sub. (2) (a) or (b), subject to any waiver granted under sub. (2) (c), other than  
5 any requirement established by the board relating to the active practice of medicine  
6 and surgery.

      \*\*\*\*NOTE: Please review this provision and let me know if any changes or other  
provisions related to this administrative license are needed. Could an administrative  
physician engage in the practice of medicine and surgery under another physician's  
delegated practice?

7           **SECTION 11.** 448.05 (6) (a) of the statutes is amended to read:

8           448.05 (6) (a) Except as provided in pars. (am) ~~and~~, (ar), and (at), the board  
9 shall examine each applicant it finds eligible under this section in such subject  
10 matters as the board deems applicable to the class of license or certificate which the  
11 applicant seeks to have granted. Examinations may be both written and oral. In lieu  
12 of its own examinations, in whole or in part, the board may make such use as it deems  
13 appropriate of examinations prepared, administered, and scored by national  
14 examining agencies, or by other licensing jurisdictions of the United States or  
15 Canada. The board shall specify passing grades for any and all examinations  
16 required.

17          **SECTION 12.** 448.05 (6) (at) of the statutes is created to read:

18          448.05 (6) (at) When examining an applicant for a license to practice medicine  
19 and surgery or an administrative physician license under par. (a), the board may only  
20 use examinations prepared, administered, and scored by national examining  
21 agencies, except that the board may interview an individual applicant as needed to  
22 determine information specific to that applicant.

23          **SECTION 13.** 448.06 (1) of the statutes is amended to read:

1           448.06 (1) GRANT OF LICENSE, CERTIFICATE, OR LIMITED PERMIT. If Subject to s.  
2           448.05 (1)(d), if three-fourths of the members of the board find that an applicant who  
3           has passed the required examinations is qualified, the board shall so notify the  
4           applicant and shall grant the license, certificate, or limited permit.

5           **SECTION 14.** 448.065 of the statutes is amended to read:

6           **448.065 Permanent license for certain professors.** A person who  
7           possesses a temporary license under s. 448.04 (1) (b) 2., 2011 stats., and who has  
8           practiced under such license for 4 or more years may apply for a license to practice  
9           medicine and surgery under s. 448.04 (1) (a). If the applicant achieves a passing  
10          grade in the examination for a license to practice medicine and surgery and  
11          three-fourths of the board find that the applicant is qualified, notwithstanding s.  
12          448.05 (1) (b) and (2), the board may grant the license. The board may limit the  
13          license and, notwithstanding s. 448.02 (3) (e), may continue such limits indefinitely  
14          or may remove the limits when it is satisfied that the reasons for the limits no longer  
15          exist, except that the board shall remove any limitations on the geographical areas  
16          of this state in which the physician may practice and any limitations on the persons  
17          with whom the physician may associate, after a period of 5 years of continuous  
18          medical practice within this state by the physician.

          \*\*\*\*NOTE: Do you want to repeal this provision instead, or allow licensees under s.  
          448.04 (1) (bg), as created in the bill, to obtain a permanent license in this manner?

19          **SECTION 15.** 448.08 (1) (a) of the statutes is amended to read:

20          448.08 (1) (a) "Hospital" means an institution providing 24-hour continuous  
21          service to patients confined therein which is primarily engaged in providing facilities  
22          for diagnostic and therapeutic services for the surgical and medical diagnosis,  
23          treatment and care, of injured or sick persons, by or under the supervision of a

1 professional staff of physicians and surgeons, and which is not primarily a place of  
2 rest for the aged, drug addicts or alcoholics, or a nursing home. Such hospitals may  
3 charge patients directly for the services of their employee nurses, nonphysician  
4 anesthetists, physical therapists and medical assistants other than physicians or  
5 dentists, and may engage on a salary basis interns and residents who are  
6 participating in an accredited training program under the supervision of the medical  
7 staff, and persons with a resident educational license issued under s. 448.04 (1) (bm)  
8 or a temporary educational certificate issued under s. 448.04 (1) (c), 2011 stats.

9 **SECTION 16.** 448.10 (2) of the statutes is created to read:

10 448.10 (2) LICENSES TO PRACTICE MEDICINE AND SURGERY. (a) Notwithstanding  
11 s. 448.05 (2), a person who, on the effective date of this paragraph .... [LRB inserts  
12 date], possessed a valid license to practice medicine and surgery under s. 448.05 (2),  
13 2011 stats., may retain, practice under, and continue to renew that license, subject  
14 to any other provisions in this subchapter or any requirements established by the  
15 board governing a license to practice medicine and surgery.

16 (b) A person who, on the effective date of this paragraph .... [LRB inserts date],  
17 possessed a valid temporary license to practice medicine and surgery under s. 448.04  
18 (1) (b) 2., 2011 stats., may retain, practice under, and continue to renew that license  
19 in accordance with s. 448.04 (1) (b) 2., 2011 stats., subject to any other provisions in  
20 this subchapter or any requirements established by the board governing that license.

21 (c) A person who, on the effective date of this paragraph .... [LRB inserts date],  
22 possessed a valid temporary educational permit to practice medicine and surgery  
23 under s. 448.04 (1) (c), 2011 stats., may retain, practice under, and continue to renew  
24 that permit in accordance with s. 448.04 (1) (c), 2011 stats., subject to any other  
25 provisions in this subchapter or any requirements established by the board

governing that permit, or may apply for a resident educational license under s. 448.04 (1) (bm).

\*\*\*NOTE: Please review these three grandfathering provisions and let me know if further changes are needed. You may wish to have DSFS review these. Paragraph (a) lets physicians who currently hold licenses retain those licenses even if they would not be able to qualify for one under the new law. Paragraphs (b) and (c) allow holders of licenses and permits under the repealed provisions to keep them in accordance with prior law. The MEB may also want to take a look at s. 448.10 (4) and (5), stats., and see if those are still relevant. If not, I could repeal them in this bill.

**SECTION 17.** 462.01 (4) of the statutes is amended to read:

462.01 (4) "Physician" means a person licensed to practice medicine and surgery under s. 448.04 (1) (a) or, (b), or (bg).

\*\*\*NOTE: This provision relates to the practice of radiography and appears to exclude those possessing temporary educational permits under s. 448.04 (1) (c), so I did not include REL holders in this provision. Let me know if this is incorrect or if other changes are needed here. Please also see s. 462.04, stats.

**SECTION 18. Nonstatutory provisions.**

(1) Using the procedure under section 227.24 of the statutes, the medical examining board may promulgate rules under section 448.40 (1) of the statutes that are necessary to implement the changes in this act and rules under section 448.05 (2) (c), as affected by this act, for the period before the effective date of any permanent rules promulgated under section 448.40 (1) of the statutes, but not to exceed the period authorized under section 227.24 (1) (c) of the statutes, subject to extension under section 227.24 (2) of the statutes. Notwithstanding section 227.24 (1) (a), (2) (b), and (3) of the statutes, the board is not required to provide evidence that promulgating a rule under this subsection as an emergency rule is necessary for the preservation of the public peace, health, safety, or welfare and is not required to provide a finding of emergency for a rule promulgated under this subsection.

\*\*\*NOTE: This provision gives the MEB the authority to promulgate emergency rules if doing so is necessary to implement the changes in this act. Note that these rules, under this provision, could only be in effect for a maximum of 270 days. If more time

would be needed for permanent rules, this provision could be modified to allow the emergency rules to remain in place for a longer period.

**SECTION 19. Initial applicability.**

(1) The treatment of section 448.05 (6) (a) and (at) of the statutes first applies to an applicant who is admitted to examination for a license to practice medicine and surgery by the medical examining board under section 448.05 (2) of the statutes, as affected by this act, on the effective date of this subsection.

(2) The treatment of section 448.05 (2) of the statutes first applies to an application for a license to practice medicine and surgery under section 448.05 (2) of the statutes, as affected by this act, that is received by the medical examining board on the effective date of this subsection.

**SECTION 20. Effective date.**

(1) This act takes effect on the first day of the 12th month beginning after publication.

(END)

**2013-2014 DRAFTING INSERT  
FROM THE  
LEGISLATIVE REFERENCE BUREAU**

LRB-2237/P3insA

.....

**INSERT 11-5**

1           **SECTION 1.** 655.003 (title) <sup>✓</sup> of the statutes is amended to read:

2           **655.003** (title) **Exemptions for ~~public employees and facilities and~~**  
3           **volunteers certain persons and facilities.** <sup>✓</sup>

4           <sup>History: 1989 a. 187, 206; 1991 a. 214.</sup> **SECTION 2.** 655.003 (4) <sup>✓</sup> of the statutes is created to read:

5           655.003 (4) A physician who holds an administrative physician license issued  
6           under s. 448.04 (1) (ac). <sup>✓</sup>

(end ins)

## Duchek, Michael

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**From:** Tim <timothy.westlake@gmail.com>  
**Sent:** Monday, January 06, 2014 4:13 PM  
**To:** Duchek, Michael; Scholz, AJ  
**Subject:** Re: Medical Licensing Draft

Hi Mike-

Agree that we really can't sunset section (a) and should have them be allowed to stay grandfathered in perpetuity, But (b) and (c) should be sunsetted.

As far as the emergency rule making, 270 is good for now, --DSPS would like to see the final draft analysis to see if more is needed which we could tweak later.

Thanks and stay warm!  
Tim

Sent from my iPhone

On Jan 4, 2014, at 9:07 AM, Richele <[richele.westlake@gmail.com](mailto:richele.westlake@gmail.com)> wrote:

Sent from my iPhone

Begin forwarded message:

**From:** "Duchek, Michael" <[Michael.Duchek@legis.wisconsin.gov](mailto:Michael.Duchek@legis.wisconsin.gov)>  
**Date:** January 3, 2014, 2:42:01 PM CST  
**To:** Timothy Westlake <[richele.westlake@gmail.com](mailto:richele.westlake@gmail.com)>, "Scholz, AJ" <[AJ.Scholz@legis.wisconsin.gov](mailto:AJ.Scholz@legis.wisconsin.gov)>  
**Cc:** "Ryan, Thomas - DSPS" <[Thomas.Ryan@wisconsin.gov](mailto:Thomas.Ryan@wisconsin.gov)>, Kenneth Simons <[ksimons@mcw.edu](mailto:ksimons@mcw.edu)>, "[swan.timothy@marshfieldclinic.org](mailto:swan.timothy@marshfieldclinic.org)" <[swan.timothy@marshfieldclinic.org](mailto:swan.timothy@marshfieldclinic.org)>  
**Subject:** RE: Medical Licensing Draft

I should be able to work on this next week, I hope. In the meantime, see my two responses below in red. Also, did we decide to simply take the changes regarding the IPCF out?

-Mike

**From:** Timothy Westlake [<mailto:richele.westlake@gmail.com>]  
**Sent:** Friday, January 03, 2014 2:08 PM  
**To:** Scholz, AJ; Duchek, Michael  
**Cc:** Ryan, Thomas - DSPS; Kenneth Simons; [swan.timothy@marshfieldclinic.org](mailto:swan.timothy@marshfieldclinic.org)  
**Subject:** Medical Licensing Draft

AJ and Mike-Happy New Year!

Thanks form the work on the draft. The MEB licensing committee took a look and we'd like to recommend a few adjustments.

✓ Page 1 line 10 change to "---to practice medicine and surgery, to practice as an administrative physician, to practice perfusion---"

✓ Page 2 lines 12-13 ---(please keep consistent across all licensing types, no need for unique action)

✓ Page 3 line 3 note response--no changes needed

Page 3 line 20- 21 (please add language to insure the visiting physician license is valid only at the facility the license was originally granted), and in response to the note --that sounds fine.

✓ Page 4 line 17 note response--sounds good.

✓ Page 5 line 4 question reply--yes, it should apply to camp and substitute physicians

✓ Page 6 line 1 note response--sounds good.

✓ Page 6 line 17 note response--sounds good.

✓ Page 7 line 16 -17 please add language to insure physician is licensed to practice in another state or country. And in response to note--correct, yes.

✓ Page 8 line 7 note response--no other changes are needed. Also an admin license would not allow the physician to practice except as a private unlicensed person could acting under delegated practice--no special privileges.

✓ Page 9 lines 7-19 repeal the entire section of 448.065--if a visiting physician wants a license he will need to go through the routine channels.

✓ Page 11--DSPS has no issue with the grandfathering provisions. We would also like to see if there could be a sunseting provision of like 2 years on the grandfathering provisions. Also, we can repeal the sections 448.10 (1), (4), and (5)--all are outdated.

I don't see a problem with sunseting the grandfathering provisions (b) and (c) after 2 years since those are temporary-type licenses anyway, though it would mean I think that anyone holding licenses under those provisions would lose the authority for these licenses upon the sunseting. If that seems OK, then I can do that.

As to paragraph (a), though, I would think that this would be potentially needed for longer. Paragraph (a) (page 10, lines 11-16) allows physicians who would not be able to obtain a license under the new law to keep their license and to keep renewing it. I believe that sunseting it would eliminate the authority for them to keep their licenses. Unless the intent is to eliminate that authority, I would think you'd want to keep paragraph (a) until you're sure that everyone who has a license is eligible under the new law (s. 448.05 (2)). Feel free to let me know if there are other thoughts on this or if you think I'm missing something on that one.

✓ Page 11 line 6 note response--good as is the way you wrote it.

Page 12 line 5 note response--whatever you think is best.

I think this is more question for DSPS and the MEB how long the rulemaking process would require. If you think the permanent rules would take more than 270 days to get into effect, I'd recommend adding more time, but don't know what is typical for DSPS or an examining board so I'd rather leave it to the MEB/DSPS to offer a suggestion.

Page 12 line 16--effective date--DSPS wanted us to make sure to let y'all know they need to see the final draft analysis and might ask for a little longer time to extend the effective date based on its exact impact.

Sounds good. I will do an analysis next time.

Thanks again for all the work on this. This will have a very positive impact.

Please let me know what I can do next.

Tim

## Duchek, Michael

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**From:** Tim <timothy.westlake@gmail.com>  
**Sent:** Tuesday, January 07, 2014 9:31 AM  
**To:** Duchek, Michael  
**Subject:** Draft.

Mike-

As far as the IPFCF, we are going to leave them in it, and then they can opt out if they want to, as now is allowed for physicians who don't have clinical interactions.

Thanks  
Tim

Sent from my iPhone

## Duchek, Michael

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**From:** Tim <timothy.westlake@gmail.com>  
**Sent:** Wednesday, January 08, 2014 3:44 PM  
**To:** Duchek, Michael  
**Subject:** Re: MEB draft

Nope. It's good as is. We just wanted to make sure the visiting physician license is tied to the sponsoring facility.

Tim

Sent from my iPhone

On Jan 8, 2014, at 3:38 PM, "Duchek, Michael" <[Michael.Duchek@legis.wisconsin.gov](mailto:Michael.Duchek@legis.wisconsin.gov)> wrote:

OK. I think it sounds like it should suffice, but if you see something let me know and we can just tweak that provision instead of adding something new.

-Mike

---

**From:** Tim [<mailto:timothy.westlake@gmail.com>]  
**Sent:** Wednesday, January 08, 2014 3:35 PM  
**To:** Duchek, Michael  
**Subject:** Re: MEB draft

I see. It is duplicative. No need to restate it, if you think what is there will suffice.

Thanks  
Tim

Sent from my iPhone

On Jan 8, 2014, at 3:24 PM, "Duchek, Michael" <[Michael.Duchek@legis.wisconsin.gov](mailto:Michael.Duchek@legis.wisconsin.gov)> wrote:

Tim one other question – you had instructions to add language to ensure that the visiting physician license is only valid at the facility the license was originally granted. I just wanted to confirm that you want something added to the draft, as page 3, lines 10-14 more or less appears to say this already. So I wanted to make sure that you needed something in addition to what is already there and if so see if you still want what is on page 3, lines 10-14.

**Mike Duchek**  
**Legislative Attorney**  
**Wisconsin Legislative Reference Bureau**  
**(608) 266-0130**

## Duchek, Michael

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**From:** Tim <timothy.westlake@gmail.com>  
**Sent:** Thursday, January 09, 2014 12:31 PM  
**To:** Duchek, Michael  
**Subject:** Re: Medical Licensing Draft

Probably better to just use college throughout instead of school.

And there are foreign osteopathic schools, but we don't credential them- they can only manipulate and not prescribe or practice. You can leave it as is.

Thanks  
Tim

Sent from my iPhone

On Jan 9, 2014, at 11:21 AM, "Duchek, Michael" <[Michael.Duchek@legis.wisconsin.gov](mailto:Michael.Duchek@legis.wisconsin.gov)> wrote:

Tim/AJ,

As I am going through the bill one more time, I am looking to make sure the language is consistent across the bill. And I just have a couple, minor/technical questions:

- 1.) Is there such thing as a *foreign* osteopathic school? If so, should I add a reference to that on page 6, line 5?
- 2.) Is there a preferred term or difference between "medical [or osteopathic] **college**" vs. "medical [or osteopathic] **school**"? I know in Wisconsin we have one of each, but I thought I'd see if there's a preferred term. Otherwise, I assume these two terms ("medical school" and "medical college") are synonymous and I'll just try to use one or the other consistently throughout the bill if that's OK.

Thanks, and that should be it for now.

-Mike